Strokes and Heart Attacks: What's the Difference?

Stroke is similar to a Heart Attack, but it affects the blood vessels in the brain instead of the heart.

Signs of a stroke appear suddenly and include:

- Numbness or weakness, especially on one side of the body
- Difficulty speaking or understanding
- Vision trouble in one or both eyes
- Dizziness or difficulty walking
- Very severe headache with no known cause

If you notice these signs in yourself or someone else, immediately call 911.

- Note of the time the symptoms first appeared; "Last Known Well" time and duration may help doctors determine how to treat the problem.

Stroke is similar to Heart Attack, but it affects the blood vessels in the brain instead of the heart. The blood supply to the brain is interrupted, causing a cells in the brain to die = a ***"brain attack."***

- When the flow of blood to the brain is blocked by a clot, it's called an **ischemic stroke**.
- A temporary clot causes a "mini stroke," and is called a **transient ischemic attack** (TIA).
- A **hemorrhagic stroke** happens when a blood vessel in the brain bursts depriving an area of the brain of blood and causing damage and compression inside the brain.

Signs of a heart attack usually occur gradually, but can be sudden. They include:

- Pressure, pain or an uncomfortable sense of "fullness" in the chest. (This is the most common symptom in both men and women.)
- Discomfort in other parts of the upper body, such as one or both arms, the neck or jaw. (This occurs more frequently in women than men.)
- Shortness of breath, nausea, light-headedness or unexplained sweating. (This also occurs more frequently in women.)

If you're not sure about your symptoms, call your doctor and describe what you're feeling. If the signs are clear, **call 911 immediately**

Heart Attack: the blood supply to the heart is interrupted, causing cells in the heart to die = a ***"heart attack."***

- Progressive **coronary artery disease** (CAD) causes arteries that supply blood to the heart to become choked with fatty deposits called plaque, which narrows and blocks arteries, called **atherosclerosis**.
- When pieces of plaque break free, blood clots can form, blocking the flow of blood to the heart muscle.
- The heart does not get the oxygen and nutrients that it needs, and parts of the heart may become damaged or die from a **myocardial infarction**.

An ambulance ride to the hospital is the best way to receive prompt treatment that could make all the difference for Heart Attack or Stroke! EMS is your "First Point of Medical Care."

Although symptoms and effects can be similar, strokes and heart attacks are two different medical problems. Both are vascular events involving the blood vessels; arteries in particular. Both conditions can also lead to disability and death so remember: Time is Brain. Time is Muscle. Possibly Yours!

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Risk Factors for Stroke and Heart Attack

STROKE		HEART ATTACK	
MEN	**WOMEN**	**MEN**	**WOMEN**
Family History stroke/TIA/HA	Family History stroke/TIA/HA	Family History early AMI (55 M or 65 female parent, grand-parent, sibling)	Family History early AMI (55 M or 65 female parent, grand-parent, sibling)
Smoking - or exposure to secondhand smoke	Smoking - or exposure to secondhand smoke	Smoking - or exposure to secondhand smoke	Smoking - or exposure to secondhand smoke
Age 55 or older	Age 55 or older	Age 45 or older	Age 55 or older
Overweight and Obesity	Overweight and Obesity	Overweight and Obesity	Overweight and Obesity
High Blood Pressure - risk of stroke begins to increase at blood pressure readings higher than 120/80 millimeters of mercury (mm Hg).	High Blood Pressure - risk of stroke begins to increase at blood pressure readings higher than 120/80 millimeters of mercury (mm Hg).	High Blood Pressure - risk of stroke begins to increase at blood pressure readings higher than 120/80 millimeters of mercury (mm Hg).	High Blood Pressure - risk of stroke begins to increase at blood pressure readings higher than 120/80 millimeters of mercury (mm Hg).
High Cholesterol - total cholesterol level above 200 milligrams per deciliter - ↑ triglycerides, ↓ HDL	High Cholesterol - total cholesterol level above 200 milligrams per deciliter - ↑ triglycerides, ↓ HDL	High Cholesterol - total cholesterol level above 200 milligrams per deciliter - ↑ triglycerides, ↓ HDL	High Cholesterol - total cholesterol level above 200 milligrams per deciliter - ↑ triglycerides, ↓ HDL
Diabetes	Diabetes	Diabetes	Diabetes
Vascular Disease	Vascular Disease	Vascular Disease	Vascular Disease
Lack of Physical Activity	Lack of Physical Activity	Lack of Physical Activity	Lack of Physical Activity
Heavy or binge drinking.	Heavy or binge drinking.	Heavy or binge drinking.	Heavy or binge drinking.
Use of illicit drugs - cocaine and methamphetamines	Use of illicit drugs - cocaine and methamphetamines	Use of illicit drugs - cocaine and methamphetamines	Use of illicit drugs - cocaine and methamphetamines
Obstructive sleep apnea	Obstructive sleep apnea	Obstructive sleep apnea	Obstructive sleep apnea
	History Preeclampsia		History Preeclampsia
Stress	Stress	Stress	Stress
Men ↑risk over Women	Women ↑Deaths over Men	1st Event at Younger Age	More Likely to Die than Men
African American Male		***	***
***Men & Women: African-Americans, Mexican-Americans, American Indians, Pacific Islanders at greater risk CAD			

Another risk factor for stroke is a transient ischemic attack (TIA), also called a "mini-stroke." TIAs produce the same symptoms as a stroke but don't cause lasting damage. A person who has had one or more TIAs is almost 10 times more likely to have a stroke according to the American Stroke Association. A TIA is a medical emergency and requires immediate medical help.

Reducing Stroke and Heart Attach Risk

Control risk factors/make healthy lifestyle choices:

- Quit smoking – stay away from second hand smoke.
- Eat a healthy diet – including high fiber foods, whole-grains, vegetables, fruit, fish and lean protein.
- Get plenty of exercise and physical activity daily: even 10 minutes at a time may be beneficial.
- Aim for a healthy weight – through healthy eating choices and physical activity.
- Limit alcohol – can help ↓ triglycerides. Excessive alcohol can ↑ blood pressure.
- Know Your Numbers to: Control high blood pressure, diabetes, and cholesterol with medications, if necessary.
- Reduce stress.
- See a healthcare provider regularly (Medical and Dental)

The American Heart Association recommends that screening for heart and vascular disease begins by age 20. Screening includes measuring blood pressure, body mass index (an assessment of weight and height), waist circumference, and pulse rate at each regular health care visit, or at least every two years. Normal risk individuals should get a cholesterol profile every five years — more often if risk is higher.

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Resources: American Heart Association, National Stroke Association, Mayo Clinic